

Application # _____

* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license.

Harnett County Central Permitting
420 McKinney Pkwy Lillington, NC 27546
PO Box 65 Lillington, NC 27546
910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

Owner's Name: Mattamy Homes LLC	Date _	6/13/2025	
Site Address: 390 Denali Drive, Angier NC 27501	Phone	9192333886	
Subdivision: Riverfall	Lot	35	
Description of Proposed Work: Single Family Dwelling	<u> </u>	Total Job Cost	\$304,449.60
General Contractor Info	<u>ormation</u>		
Mattamy Homes LLC		9192333886	
Building Contractor's Company Name		Telephone	
11000 Regency Pkwy Cary, NC 27518 Address	_Raleigh_PlanReview@mattamycorp.com Email Address		
49775 HEATED SQ FT 3185	GARAGE	SQ FT 735	
License #			
Description of Work Servi			e: <u>yes</u> Yes <u>N</u> o
Ideal Electrical 734 Electrical Contractor's Company Name		Telephone	_
2436 South Miami Blvd, Durham, NC 27703			_
Address		Email Address	
12915			
License # Mechanical/HVAC Contractor	or Informa	tion	
Description of Work			
			_
		919-683-2421	
Mechanical Contractor's Company Name	·		
1094 Classic Road Apex, NC 27539 Address		Email Address	_
		Email Address	
27098 License #			
Plumbing Contractor In:	formation		
Description of Work		# Baths	4.5
Barbour & Pourron Plumbing Inc	919-533	-4455	
		Telephone	
PO Box 934 Clayton, NC 27528			_
Address	Email Address		
27132			
License # Insulation Contractor In	formation		
	auon		
Live Green Inc. 5001 old Poole Rd Raleigh, NC 27610 Insulation Contractor's Company Name & Address	-	9194536411 Telephone	



*NOTE: General Contractor / owner must fill out and sign the second page of this application.

I hereby certify that I have the authority to make necessary application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes, and the Harnett County Zoning Ordinance. I state the information on the above contractors is correct as known to me and that by signing below I have obtained all subcontractors permission to obtain these permits and if any changes occur including listed contractors, site plan, number of bedrooms, building and trade plans, Environmental Health permit changes or proposed use changes, I certify it is my responsibility to notify the Harnett County Central Permitting Department of any and all changes.

EXPIRED PERMIT FEES - 6 Months to 2 years permit re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule.

6/13/2025

Date

Affidavit for Worker's Compensation N.C.G.S. 87-14					
The undersigned applicant being the					
General Contractor	_ Owner	Officer/Agent of the	Contractor or Owner		
Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:					
Has three (3) or more employees and has obtained workers' compensation insurance to cover them. Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover					
Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.					
Has no more than two (2) employees and no subcontractors.					
While working on the project for which this permit is sought it is understood that the Central Permitting Department issuing the permit may require certificates of coverage of worker's compensation insurance prior to issuance of the permit and at any time during the permitted work from any person, firm or corporation carrying out the work.					
Sign w/Title: Archerbzent	y Op	erations Coordinator	Date: 6/13/2025		